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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10037462

Elicotive Gotobol 1, 2001									1000111				
CLAIMS AS FILED - PART I (Column 1) (Coit						mn 2)	SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			(g				1	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			☐ ☐ minus 20=		*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 =		*			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM P			RESENT					+140=	**	OR	+280=		
* If	the difference	in column 1 is	less than z	ero, ente	r "0" in c	column 2		TOTAL		OR	TOTAL		
			MENDED - PART II (Column 2) (Co			(Column 3)		SMALL ENTITY			OTHER THAN SMALL ENTITY		
		CLAIMS			HEST	Coldini o	1 1		ADDI-			ADDI-	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X42=		OR	X84=		
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		1	+140=		OR	+280=		
								TOTAL			TOTAL		
			ADDIT. FEE		OR	ADDIT. FEE							
		(Column 1)			IMN 2) HEST	(Column 3)	1						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	T C	=		X42=		OR	X84=		
L	FIRST PRESE	NTATION OF M	OLIPLE DE	PENDEN	II CLAIM		L	+140=		OR	+280=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Coli	ımn 2)	(Column 3)		ADDII. PEE		•	ADDIT. FEE		
		CLAIMS			HEST	Coldinitio	١.	1	ADD!	1		ADDI	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREV	MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***]=-		X42=		OR	X84=		
Ľ	FIRST PRESE	ULTIPLE DEPENDEN		T CLAIM		ַ			1		†		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+140=		OR	+280=	 	
* If the entry in column 1 is less than the entry in column 2, write "U in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	ADDIT. FEE		
****	The Highest Nu The "Highest Nur	amber Previously Fi mber Previously P	aid For" (Total	or Indepen	is less in ident) is th	ie highest numb	er fo	und in the ap	propriate bo	x in c	olumn 1.		